

EXHIBIT E

**State of New York
WORKERS' COMPENSATION BOARD**

**NOTICE OF ELECTION OF A CORPORATION WHICH IS REQUIRED TO HAVE COVERAGE FOR ITS
EMPLOYEES UNDER THE NEW YORK STATE WORKERS' COMPENSATION LAW TO EXCLUDE THE
SOLE SHAREHOLDER-OFFICER OR ONE OF THE TWO OR BOTH EXECUTIVE
OFFICERS-SHAREHOLDERS OF THE CORPORATION FROM SUCH COVERAGE**

To: (Print name and address of insurance carrier here)

TAKE NOTICE that under the provisions of Section 54, subdivision 6, of the Workers' Compensation Law as amended, the corporation named below elects to exclude the executive officer(s) named below from coverage under the New York State Workers' Compensation Law with respect to all the policies issued to the corporation by the insurance carrier named above.

Name of Corporation TD Construction Services Corp
Address of Corporation 63 Flushing Avenue Unit 346
Incorporated Under the Laws of the State of New York

Type: ☒ One-person corp. ☐ Two-person corp. (A two-person corporation may elect to exclude one or both executive officers, provided that between them they own all the stock in the corporation, and that each officer owns at least one share of stock.)

Executive Officer(s) to be Excluded from Policy
1. Name Athena Robinson Title President
2. Name _____ Title _____

CERTIFICATION

USE FOR ONE-PERSON CORPORATION

I, ATHENA ROBINSON, certify that I am the sole executive officer of the above-named corporation; that I have been since 2012 the sole owner of all issued and outstanding stock of the corporation and hold all the offices pursuant to paragraph (e) of Section 715 of the Business Corporation Law. (Affix corporate seal below, if you have one.)

Signature of Officer

Date

Telephone No.

USE FOR TWO-PERSON CORPORATION

We, _____, _____ and _____, certify that we are the two executive officers of the above-named corporation, having been duly appointed by corporate resolution; that we have been since _____ the sole owners of all issued and outstanding stock and that each of us owns at least one share of stock of the corporation, and that we hold all of the offices pursuant to paragraph (e) of Section 715 of the Business Corporation Law. (Affix corporate seal below, if you have one.)

Signature of Officer

Date

Telephone No.

Signature of Officer

Date

Telephone No.

**THIS ELECTION IS FINAL AND BINDING
UPON THE OFFICER(S) NAMED UNTIL
REVOKED BY THE CORPORATION.**

**CORPORATE
SEAL***

See reverse side for relevant portions of Sec. 54, subd. 6 (WCL)
and Sec. 715, Par. (e) of the Business Corporation Law.

*If the corporation does not
have a seal, check here ☐